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CONFIRMATION NO. 8085

<b>SERIAL NUMBER</b> 09/934,060	<b>FILING OR 371(c) DATE</b> 08/21/2001 <b>RULE</b>	<b>CLASS</b> 424	<b>GROUP ART UNIT</b> 1648	<b>ATTORNEY DOCKET NO.</b> 4115-144 CIP
<b>APPLICANTS</b> Anthony Louis Devico, Alexandria, VA; Timothy R. Fouts, Columbia, MD; Robert G. Tuskan, Baltimore, MD;				
<b>** CONTINUING DATA *****</b> This application is a CIP of 09/684,026 10/06/2000 which claims benefit of 60/158,321 10/08/1999				
<b>** FOREIGN APPLICATIONS *****</b>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 10/02/2001</b>				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged _____ Examiner's Signature Initials		<b>STATE OR COUNTRY</b> VA	<b>SHEETS DRAWING</b> 22	<b>TOTAL CLAIMS</b> 54
<b>INDEPENDENT CLAIMS</b> 1				
<b>ADDRESS</b> 23448				
<b>TITLE</b> VIRUS COAT PROTEIN/RECEPTOR CHIMERAS AND METHODS OF USE				
<b>FILING FEE RECEIVED</b> 1139	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	